

D-3150

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Champion, Mary J.

Serial No. 10/576,803

Filing Date: April 21, 2006

For: SYSTEMS AND METHODS FOR
TREATING HOT FLASHES ASSOCIATED
WITH MENOPAUSE

) Group Art Unit: 1615

) Examiner: Isis Ghali

I hereby certify that this correspondence is being
deposited with the United States Postal Service
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an envelope addressed to: Commissioner for Patents,
PO Box 1450, Alexandria, VA 22313-1450, on or before

Date

June 29, 2007

Alicia Curran

Request for One-Month Extension of Time

Commissioner for Patents

P.O. BOX 1450

Alexandria, VA 22313-1450

Dear Sir:

Applicant hereby requests an extension of time under 37
C.F.R. 1.136(a) of **one month** for replying to an office action
dated April 5, 2007, of which a shortened statutory period for
reply for two months was set.

07/05/2007 EAREGAY1 00000002 10576803

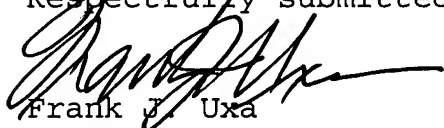
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60.00 0P

D-3150
10/576,803

The requisite fee of \$60 is enclosed herewith. In addition, authorization is hereby given to charge Deposit Account No. 21-0890 for any deficiency or to credit any overpayment.

Respectfully submitted,



Frank J. Uxa
Attorney for the Applicant
Reg. No. 25,612
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LAF



FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Complete if Known

| | |
|----------------------|----------------|
| Application Number | 10/576,803 |
| Filing Date | April 21, 2006 |
| First Named Inventor | CHAMPION |
| Examiner Name | Ghali, Isis |
| Art Unit | 1615 |
| Attorney Docket No. | D-3150 |

☒ Application claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 60.00

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number 21-0890 Deposit Account Name Frank J. Uxa

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below

☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) associated with this communication

☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |
| Subtotal (1) | | | | | | | 0 |

2. EXCESS CLAIM FEES

| Fee Description | Small Entity | |
|---|--------------|---------------|
| | Fee (\$) | Fee (\$) |
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent | 50 | 25 |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200 | 100 |
| Multiple Dependent Claims | 360 | 180 |
| Total Claims | Extra Claims | Fee (\$) |
| -20 or HP = | x | Fee Paid (\$) |
| HP = highest number of total claims paid for, if greater than 20 | | |
| Indep. Claims | Extra Claims | Fee (\$) |
| -3 or HP = | x | Fee Paid (\$) |
| HP = highest number of independent claims paid for, if greater than 3 | | |
| Subtotal (2) | | 0 |

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| -100 = | /50= | (round up to a whole number) | x | |
| Subtotal (3) | | | | 0 |

4. OTHER FEE(S)

| | |
|--|--------------|
| <input type="checkbox"/> Surcharge - Late filing fee or oath/declaration: \$130 fee (\$65 small entity discount) | |
| <input type="checkbox"/> Non-English Specification: \$130 fee (no small entity discount) | |
| <input checked="" type="checkbox"/> 1-month extension of time: \$120 fee (\$60 small entity discount) | 60.00 |
| <input type="checkbox"/> 2-month extension of time: \$450 fee (\$225 small entity discount) | |
| <input type="checkbox"/> 3-month extension of time: \$1020 fee (\$510 small entity discount) | |
| <input type="checkbox"/> 4-month extension of time: \$1590 fee (\$795 small entity discount) | |
| <input type="checkbox"/> 5-month extension of time: \$2160 fee (\$1080 small entity discount) | |
| <input type="checkbox"/> Information Disclosure Statement Fee: \$180 fee (no small entity discount) | |
| <input type="checkbox"/> Notice of Appeal: \$500 fee (\$250 small entity discount) | |
| <input type="checkbox"/> Filing a Brief in Support of Appeal: \$500 fee (\$250 small entity discount) | |
| <input type="checkbox"/> Request for Oral Hearing: \$1000 fee (\$500 small entity discount) | |
| <input type="checkbox"/> Utility Issue Fee: \$1400 fee (\$700 small entity discount) | |
| <input type="checkbox"/> Recording each patent assignment per property (times number of properties): \$40 fee (no small entity fee discount) | |
| <input type="checkbox"/> Request for Continued Examination: \$790 fee (\$395 small entity discount) | |
| <input type="checkbox"/> Other: _____ | |
| Subtotal (4) | 60.00 |

SUBMITTED BY

| | | | | | |
|-------------------|--------------|-----------------------------------|--------|-----------|--------------|
| Name (Print/Type) | Frank J. Uxa | Registration No. (Attorney/Agent) | 25,612 | Telephone | 949-450-1750 |
| Signature | | | | Date | 6/29/07 |